



MVPP & MSHARP

Application Workshop

1 Who Should Attend . . .

This program is a must for anyone concerned about health and safety on the job including:

- ▶ Managers concerned about liability and workers' compensation costs
- ▶ Employees who want to learn proper techniques for protecting their safety and health at work
- ▶ Business owners who want to learn about compliance with MIOSHA

2 Why You Need This Workshop . . .

- ▶ To reduce disabling injuries and illnesses to employees - and to ensure that every worker goes home safe and healthy every day.
- ▶ To reduce the high direct costs of work-related injuries, which grew to \$42.5 billion nationally in 2000, and indirect costs, which were estimated at an additional \$127 - \$212 billion in 2002. (*2003 Liberty Mutual Safety Index.*)
- ▶ To enhance your company's bottom line. A strong safety and health commitment not only protects workers, it also reduces worker's compensation costs, improves employee morale, and increases production and quality.

3 What You'll Learn . . .

This workshop is for those companies with an exemplary history of safety and health diligence and performance. These companies may qualify for either the **Michigan Voluntary Protection Program (MVPP)** or the **Michigan Safety & Health Achievement Recognition Program (MSHARP)**.

These recognition programs are designed especially for such high performing worksites. Participants receive information regarding the benefits of participation in these programs such as exemptions from programmed inspections and state/national recognition for their success in Organizational excellence. The application and review process is covered in detail along with the differences in qualification requirements for acceptance in the **MVPP** and **MSHARP**.

Agenda

We offer a flexible program agenda to emphasize the topics you want most.

- ▶ What is MVPP and MSHARP?
- ▶ Who qualifies for MVPP and MSHARP?
- ▶ Benefits of participation in the programs
- ▶ Review of application process for recognition programs

Facilitator

Doug Kimmel was recently named as Michigan's Voluntary Protection (MVPP) Specialist, bringing over 14 years of safety and health experience to this new position. His past positions include: Worker's Compensation Underwriter, Loss Prevention Consultant, and most recently, MIOSHA Safety Consultant.

Doug earned a B.S. (Business Management) degree from Ferris State University, is certified in Workers' Compensation Rating and has successfully completed numerous safety and health training courses.

During his time with MIOSHA, Doug has performed hazard surveys and conducted training at both individual companies and conferences. He has been a speaker at the Michigan Safety Conference and has developed original safety-training programs, which are shared with other safety consultants in the Division.

Doug acts as Team Leader on MVPP on-site reviews, which are performed throughout Michigan. He is responsible for completing reports for the Bureau Director, which recommends the applicant's acceptance as an MVPP company.



Doug Kimmel
*Occupational Safety Consultant,
MIOSHA, CET Division*

Presenters: Doug Kimmel and Barry W. Simmonds,
Occupational Safety Consultants, MIOSHA CET Division

Program Details

DATE: September 27, 2006

LOCATION: UPPCO Headquarters Building
600 E. Lakeshore Drive
Houghton, Michigan 49931

COST: \$30.00 per person.
Includes course materials.

TIME: Check-in - 8:00 a.m.
Program - 8:30 a.m. to 12:30 p.m.

DEADLINE: Register by September 20, 2006
Enrollment is limited to 24 participants,
so please register early!

CONTACT: Philip Musser - 906.482.6817 or
pmusser@kedabiz.com

COSPONSOR: Keweenaw Economic Development Alliance

If this valuable seminar doesn't fit with your schedule or position, please pass this flyer on to a colleague.

How to Register

MVPP & MSHARP Application Workshop

Complete information at right to
register by . . .

► **Phone:** 906.482.6817

► **Mail:** Keweenaw Economic
Development Alliance
600 East Lakeshore Drive
Houghton, MI 49931
Attention: Philip Musser

Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email: _____

Number Attending: _____ @ \$30 Each = \$ _____

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